

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 13 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K31103**

1. Corporation Name

ORANGE PEEL ENTERPRISES, INCORPORATED

Principal Place of Business

Mailing Address

2183 PONCE DE LEON CIRCLE
VERO BEACH FL 32960
US

2183 PONCE DE LEON CIRCLE
VERO BEACH FL 32960
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

08/16/1988

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0386009

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	DEAUVILLE, JUDE A	2183 PONCE DE LEON CIRCLE	VERO BEACH FL 32960
VSTD	DEAUVILLE, LANI V	2183 PONCE DE LEON CIRCLE	VERO BEACH FL 32960

000023749240
10/13/03--01063--004 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DEAUVILLE, JUDE A PRESIDE
2183 PONCE DE LEON CIRCLE
VERO BEACH FL 32960

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

[Signature]
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date **10/9/03**

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

[Signature]
SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **10/9/03**

Daytime Phone #

Daytime Phone #

CR2E040 (7/03)

GREENS+[®]
SUPERFOOD OF THE 21st CENTURY



www.greensplus.com

FIBER GREENS+[™]
Pro-N-50+[™]

October 9, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee FL 32314

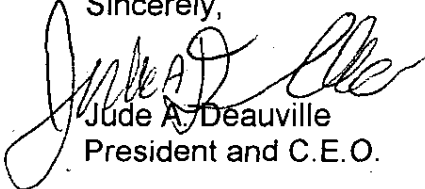
RE: 2003 Uniform Business Report Notice

Dear Sirs/Madame:

Please be advised that the two prior Uniform Business Report notices were not received by Orange Peel Enterprises, Inc.

We enclose herewith an Application for Reinstatement Document #K31103, together with the \$150.00 fee.

Sincerely,



Jude A. Deauville
President and C.E.O.